



# COACH ASSISTANT COACH ADAPTIVE VOLUNTEER

## Volunteer Application

**Contact:**  
**Athletic/Aquatics Coordinators**  
Recreation Center  
307 Miller's Crossing  
Harker Heights  
254-953-5657

### Checklist

- Coach Information Page
- Read & Sign All Guidelines
- Harker Heights Background Check Form Completed
- DPS Form Completed
- Appendix Forms Completed
- Political Activity Notice for Volunteers
- Copy of Photo ID
- Tear Off & Give Applicant – A Summary of Your Right Under the Fair Credit Reporting Act

# HARKER HEIGHTS PARKS & RECREATION

Area(s) of Interest:	_____ Head Coach	_____ Assistant Coach	_____ Team Volunteer
_____ Spring Tee Ball	_____ Spring Baseball	_____ Spring Softball	_____ Summer Flag Football
_____ Summer Volleyball	_____ Fall Soccer	_____ Winter Basketball	Adaptive Sport: _____

What age division(s) / sport(s) are you interested in head coaching? \_\_\_\_\_

What age division(s) / sport(s) are you interested in assistant coaching? \_\_\_\_\_

Have you coached with us before? (circle one) Yes No Most Recent Season: \_\_\_\_\_

Name: \_\_\_\_\_  
(First) (Middle Initial) (Last)

Date of Birth: \_\_\_\_\_ Maiden and/or Other Names Used: \_\_\_\_\_  
(mm/dd/yyyy)

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ Gender: M F Race: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ Alt Phone: \_\_\_\_\_ - \_\_\_\_\_ Shirt Size: S M L XL XXL XXXL

E-Mail Address: \_\_\_\_\_

Please list your child and their age: \_\_\_\_\_

If you are a head coach please list any assistant coaches: \_\_\_\_\_

If you are assistant coaching please list the coach you will be helping: \_\_\_\_\_

**In Case of Emergency Contact:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ Relationship: \_\_\_\_\_

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

Date Submitted to Sports:	Received By:	Date Submitted to HR:	Sports Approval:

**RELATED EXPERIENCE:**

Please list in chronological order beginning with the most recent, your educational, professional, and relevant experiences to include: degrees, certificates, licenses, organizations and/or affiliations.

**WEB MEMBERSHIPS:**

Please list and all, current personal or business websites, web pages or memberships on any Internet-based chat room, social clubs or forums, to include, but not limited to: Facebook, MySpace, Blogs, Yahoo, YouTube, etc.

Online Account	Screen Name
_____	_____
_____	_____
_____	_____

Have you ever been convicted, plead guilty or no contest, or received deferred adjudication before? Yes \_\_\_\_\_ No \_\_\_\_\_  
If Yes, Please Explain: \_\_\_\_\_

Do you currently have any criminal charges pending? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Please Explain: \_\_\_\_\_

*(Omission of convictions, guilty or no contest pleas, or receiving deferred adjudication will result in automatic disqualification. The only exception is a minor traffic violation unless the position for which you are applying requires the operation of a motor vehicle. The seriousness of the crime, date of conviction, and the relevance of the crime to this position will be considered prior to participation in the Harker Heights Parks and Recreation Department (HHPRD) programs.)*

**As a HHPRD Volunteer Coach, Volunteer Assistant Coach, or Team Volunteer I agree:**

1. To completely fill out and submit HHPRD background check, application and Authorization to Release Information annually.
2. To provide leadership through encouragement by following ALL league rules, bylaws, constitutions, etc. especially those concerning player participation, coach conduct, and sportsmanship.
3. To abide by all City of Harker Heights / HHPRD policies and procedures, and facility rules.
4. To properly maintain and return team equipment. **Failure to do so will result in a loss of the 50% discount for head coaches.**
5. To display respect to HHPRD Staff, official(s), and score keeper(s).
6. To be responsible for the conduct of his/her team, assistant coaches and spectators.
7. To ensure a safe and supportive environment for all youth playing sports.
8. To be punctual and in attendance to all scheduled games and practices provided by the Sports Department.

**\*By signing you are agreeing to all terms and conditions as listed above and assigned by HHPRD Staff. By violating any of the above terms and conditions you may be subject to removal or other disciplinary actions at the discretion of City Staff. \***

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Parent Signature (if under 18): \_\_\_\_\_

# City of Harker Heights Background Check

## Disqualifying Offenses

No person may serve with youth or children who has ever been convicted of any disqualifying offense, been on probation or received deferred adjudication for any disqualifying offense, or has presently pending any criminal charges alleging a disqualifying offense.

Disqualifying offenses are as follows:

- a. An offense classified as an offense against the person or family.

Examples:

Offenses against the person include, but are not limited to murder, assault, sexual assault, injury to a child, enticing a child, and harboring a child.

Offenses against the family include, but are not limited to bigamy, incest, interference with child custody, enticing a child, and harboring a runaway child.

- b. An offense classified as an offense against public order or indecency.

Examples:

Offenses against public order or indecency include, but are not limited to prostitution, obscenity, sexual performance by a child, possession or promotion of child pornography, and disorderly conduct.

- c. Robbery, arson, or an offense of any law regulating the possession, use, or carrying of weapons.

- d. A violation of any law intended to control the possession or distribution of any substance included as a controlled substance in Texas Controlled Substance Act.

- e. A violation of any law intended to limit the furnishing of alcohol or tobacco products to a minor.

- f. Any other felony offense which, in the judgment of the Parks & Recreation Director, indicates an unreasonable risk of harm to a minor.

**Exceptions:** misdemeanor drug or alcohol related convictions and convictions for assault and battery crimes against the person category may be excused if the convictions occurred more than five (5) years prior to the background check.

## Acknowledgments

(Please initial)

\_\_\_\_\_ I understand that, if the responsibilities I am assuming involve contact and/or interaction with minors, a condition for accepting the responsibilities is that I am not one who has ever, or currently abuses minors including, but not limited to abusing them sexually.

\_\_\_\_\_ I understand that, if the responsibilities I am assuming involve contact and/or interaction with minors, a condition for accepting the responsibilities is that I do not have a paraphiliac diagnosis (e.g. pedophilia, exhibitionism, voyeurism).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# DPS Computerized Criminal History (CCH) Verification

## (AGENCY COPY)

I, \_\_\_\_\_, acknowledge that a Computerized Criminal

APPLICANT or EMPLOYEE NAME (Please print)

History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. (This is not a consent form, but serves as information for the applicant.) Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411; Subchapter F.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is not allowed to discuss with me any CHRI obtained using the name and DOB method. The agency may request that I also have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

In order to complete the fingerprint process I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online at [www.txdps.state.tx.us /Crime Records/Review of Personal Criminal History](http://www.txdps.state.tx.us/CrimeRecords/ReviewofPersonalCriminalHistory) or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$25.00 to the fingerprinting services company.

Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

**(This copy must remain on file by this agency. Required for future DPS Audits)**

\_\_\_\_\_  
Signature of Applicant or Employee (optional)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agency Name (Please print)

\_\_\_\_\_  
Agency Representative Name (Please print)

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Date

<b>Please: Check and Initial each Applicable Space</b>	
CCH Report Printed:	
YES _____ NO _____	_____ initial
Purpose of CCH: _____	
Empl ___ Vol/Contractor ___	_____ initial
Date Printed: _____	_____ initial
Destroyed Date: _____	_____ initial
<b>Retain in your files</b>	

INCODE Record Check: CLEAR or NOT CLEAR

Rev. 09/2015

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Completed By:

## **ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK**

I acknowledge receipt of the separate document entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by \_\_\_\_\_ ("the Company") at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **Compu-Fact Research, Inc., 1236 Jungermann Rd, Ste. H-1, St. Peters, MO 63376; (888) 258-0216, compufact.com** and/or Employer. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

**New York residents/applicants only:** Upon request, you will be informed whether or not a consumer report was requested by the Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law.

**New York City residents/applicants only:** You acknowledge and authorize the Employer to provide any notices required by federal, state, or local law to you at the address(es) and/or email address(es) you provided to the employer.

**Washington State residents/applicants only:** You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

**Massachusetts and New Jersey residents/applicants only:** You have the right to inspect and promptly receive a copy of any investigative consumer report requested by the company by directly contacting the consumer reporting agency identified above.

**Minnesota and Oklahoma residents/applicants only:** Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

**California residents/applicants only:** By signing below, you acknowledge receipt of the "NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW".

**This information will be used for background screening purposes only and will not be used as hiring criteria.**

\_\_\_\_\_  
NAME (FIRST/ MIDDLE/ LAST)

\_\_\_\_\_  
MALE/ FEMALE

\_\_\_\_\_  
OTHER NAMES USED IN THE LAST SEVEN YEARS (FIRST/ MIDDLE/ LAST)

**Home Address for the past seven years: (List additional addresses on separate page, if needed.)**

\_\_\_\_\_  
CURRENT ADDRESS (STREET / CITY, STATE, ZIP)

\_\_\_\_\_  
PREVIOUS ADDRESS (STREET / CITY, STATE, ZIP)

\_\_\_\_\_  
PREVIOUS ADDRESS (STREET / CITY, STATE, ZIP)

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
DATE OF BIRTH (MONTH/DAY/YEAR)

\_\_\_\_\_  
DRIVER LICENSE NUMBER

\_\_\_\_\_  
DRIVER'S LICENSE STATE OF ISSUES

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TODAY'S DATE

## Political Activity Notice for Volunteers

Volunteers are encouraged to vote and exercise other prerogatives of citizenship consistent with State and Federal law.

When a person is working in the role or function of a volunteer for the City of Harker Heights, they may not:

1. Wear apparel or a similar communicative device relating to a candidate, measure, or political party. If a volunteer is wearing apparel relating to a candidate, measure or political party, they will be asked to remove or cover up their apparel prior to volunteering.
2. Use his or her authority to influence or interfere with or affect the result of an election or nomination for office;
3. Directly or indirectly coerce, attempt to coerce, command, or advise a local or state officer or employee (in his or her official capacity) to pay, lend or contribute anything of value to a party, committee, organization, agency, or person for political purpose.

I understand that in participating as a volunteer, I am required to abide by the Political Activity Notice. I further understand and agree that if I am found to be in violation of political activity notice, I will be removed from the volunteer program.

Volunteer Printed Name \_\_\_\_\_

Volunteer Signature \_\_\_\_\_

Parent/Guardian Printed Name \_\_\_\_\_

Parent/Guardian Signature (If under 18) \_\_\_\_\_

*Para información en español, visite [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.*

## **A Summary of Your Rights Under the Fair Credit Reporting Act**

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer



reporting agency, the agency must investigate unless your dispute is frivolous. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

#### **CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE**

**You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization.** The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:**

<b>TYPE OF BUSINESS:</b>	<b>CONTACT:</b>
<p>1. a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement &amp; Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>